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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	09/864,280
		Filing Date	May 25, 2001
		First Named Inventor	Hajime KIMURA
		Group Art Unit	2615
		Examiner Name	Lin Ye
Total Number of Pages in This Submission		Attorney Docket Number	740756-23 Technology Center 2600

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ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Luan C. Do, Reg. No. 38,434 Nixon Peabody LLP 401 9 th Street, N.W. Suite 900 Washington, D.C. 20004-2128
Signature	
Date	December 17, 2004

CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]	
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<input type="checkbox"/> transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at (703) _____	
12-17-04 Date	 Signature Deborah Novakhed Typed or printed name

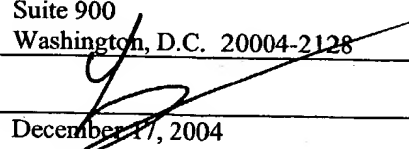
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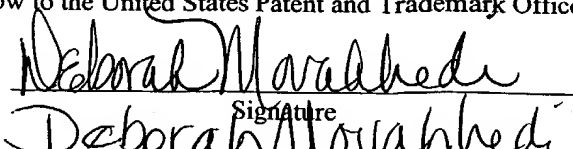
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		Group Art Unit	2615
		Examiner Name	Lin Ye
Total Number of Pages in This Submission		Attorney Docket Number	740756-2 Technology Center 2600

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Signature	
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12-17-04 Date	 Signature Deborah Novakhedi Typed or printed name

PATENT & TRADEMARK OFFICE				Complete if Known									
<div>DEC 23 2004</div> <div>RECEIVED</div> <div>DEC 23 2004</div> <div>Technology Center 2600</div>				Application Number		09/864,280							
				Filing Date		May 25, 2001							
				First Named Inventor		Hajime KIMURA							
				Examiner Name		Lin Ye							
				Art Unit		2615							
TOTAL AMOUNT OF PAYMENT (\$)				1,000		Attorney Docket No.		740756-2317					
METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)									
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None				3. ADDITIONAL FEES									
<input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 19-2380 [740756-2317] Deposit Account Name: Nixon Peabody LLP				Large Entity Small Entity									
The Commissioner is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.				Fee Code		Fee (\$)		Fee Code		Fee (\$)		Fee Description	
				1051		130		2051		65		Surcharge - late filing fee or oath	
				1052		50		2052		25		Surcharge - late provisional filing fee or cover sheet	
				1053		130		1053		130		Non-English specification	
				1812		2,520		1812		2,520		For filing a request for <i>ex parte</i> reexamination	
				1804		920*		1804		920*		Requesting publication of SIR prior to Examiner action	
				1805		1,840*		1805		1,840*		Requesting publication of SIR after Examiner action	
				1251		120		2251		60		Extension for reply within first month	
				1252		450		2252		225		Extension for reply within second month	
				1253		1,020		2253		510		Extension for reply within third month	
				1254		1,590		2254		795		Extension for reply within fourth month	
				1255		2,160		2255		1,080		Extension for reply within fifth month	
				1401		500		2401		250		Notice of Appeal	
				1402		500		2402		250		Filing a brief in support of an appeal	
				1403		1,000		2403		500		Request for oral hearing	
				1451		1,510		1451		1,510		Petition to institute a public use proceeding	
				1452		500		2452		250		Petition to revive - unavoidable	
				1453		1,500		2453		750		Petition to revive - unintentional	
				1501		1,400		2501		700		Utility issue fee (or reissue)	
				1502		800		2502		400		Design issue fee	
				1503		1,100		2503		550		Plant issue fee	
				1460		130		1460		130		Petitions to the Commissioner	
				1807		50		1807		50		Processing fee under 37 CFR 1.17(q)	
				1806		180		1806		180		Submission of Information Disclosure Stmt	
				8021		40		8021		40		Recording each patent assignment per property (times number of properties)	
				1809		790		2809		395		Filing a submission after final rejection (37 CFR 1.129(a))	
				1810		790		2810		395		For each additional invention to be examined (37 CFR 1.129(b))	
				1801		790		2801		395		Request for Continued Examination (RCE)	
				1802		900		1802		900		Request for expedited examination of a design application	
				Other fee (specify) _____									
SUBTOTAL (1) (\$)				0		SUBTOTAL (3) (\$)						0	
1. BASIC FILING FEE				2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE									
Large Entity Fee Code (\$)				Small Entity Fee Code (\$)				Fee Description				Fee Paid	
1001 300				2001 150				Utility filing fee					
1002 200				2002 100				Design filing fee					
1003 200				2003 100				Plant filing fee					
1004 300				2004 150				Reissue filing fee					
1005 200				2005 100				Provisional filing fee					
SUBTOTAL (1) (\$)				0									
Total Claims 88 -76** = 12 X 50 = 600													
Independent Claims 13 -11** = 2 X 200 = 400													
Multiple Dependent X = 0													
Large Entity Fee Code (\$)				Small Entity Fee Code (\$)				Fee Description				Fee Paid	
1202 50				2202 25				Claims in excess of 20					
1201 200				2201 100				Independent claims in excess of 3					
1203 360				2203 180				Multiple dependent claim, if not paid					
1204 200				2204 100				** Reissue independent claims over original patent					
1205 50				2205 25				** Reissue claims in excess of 20 and over original patent					
SUBTOTAL (2) (\$)				1,000									
**or number previously paid, if greater; For Reissues, see above													
SUBMITTED BY				Complete (if applicable)									
Name (Print/Type) Luan Q. Do				Registration No. 38,434				Telephone (202) 585-8000					
Signature				Date 12-17-04				December 17, 2004					
SEND TO: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450													